



TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	10/590,588
Confirmation Number	
Filing Date	with an effective filing date of February 16, 2005
First Named Inventor	Stefan PREBECK, Kurt SCHACHNER and Günter PILAT
Group Art Unit	3663
Examiner Name	Edward J. PIPALA Fax: (571) 273-8300
Total No. of Pages in this Submission:8	Attorney Docket Number ZAHFRI P886US

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form (in Duplicate) <input type="checkbox"/> Fee attached - Check \$ <input checked="" type="checkbox"/> Amendment/Response [6] <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request (in Duplicate) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Stmt <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Part/s Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment papers (for an Application) <input checked="" type="checkbox"/> Drawing(s) --Annotated Sheet(s) Replacement Sheet(s) New Sheet(s) [1] <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition (DELETED - no longer useful) <input type="checkbox"/> To Convert a Provisional Petition <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Additional Enclosure(s) (please identify below):
--	---	---

REMARKS

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual Name	Jay S. Franklin DAVIS & BUJOLD P.L.L.C.	Reg. No. 54,105 CUSTOMER NO. 020210
Signature		
Date	August 20, 2009	

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450 on August 20, 2009

Signature		Date: August 20, 2009 (amp)
-----------	--	-----------------------------